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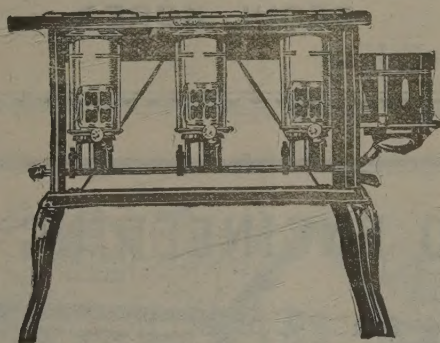
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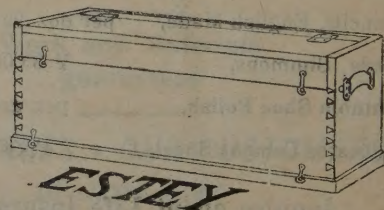
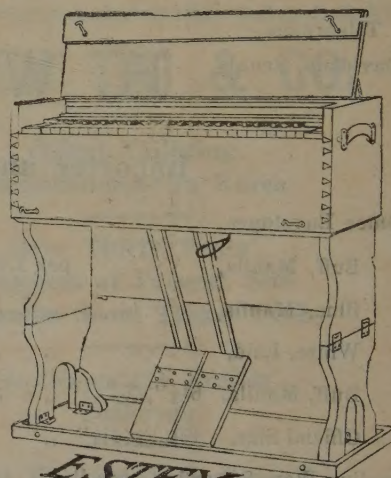
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VOL. XXI

OCTOBER, 1925

No. 10

"Severance"

J. D. VANBUSKIRK, M. D.

THE INSTITUTION POPULARLY called "Severance" includes the Severance Union Medical College, Severance Hospital, Severance Hospital School for Nurses and Midwives, Severance Wholesale Medical Supply Co., Severance Pharmacy, and the Severance Optical Shop. It is the largest missionary institution in Korea and one of the largest of the whole missionary field.

The property is worth ₩ 400,000 at a conservative estimate.

There are 32 Westerners (including 13 wives), 20 Korean doctors, 4 pharmacists, dentists and X-ray technicians, 6 Japanese time-teachers, 12 Korean graduate nurses, and over 100 other Korean employees, besides 70 medical students and 30 student nurses, over 250 workers and students connected with "Severance."

Over 2,000 patients are cared for in the Hospital each year and 70,000 treatments are given in the Out-patient Department.

The expenditures for last year were ₩ 298,008.48 (excluding Missionary support and inter-departmental charges).

"Severance" last year rendered probably the largest charity service of single institution in Korea. The cost of 13,670 free in-patient-days and 29,638 out-patient treatments was over ₩ 60,000.00.

This work in itself is a big Christian service. There is also the surpassing opportunity to present Christ in a winsome way to 2,000 sick folks and their friends in the Hospital and the hundreds that daily throng the out-patient department and the results are worth while though not equal to the great opportunity.

"Severance" is not only an institution to render this big service, it is a training station. Korean young men here learn medical science and young women the art of nursing; both are led by precept and example to live not unto themselves but as followers of the Master Healer to serve in His spirit. Thus the influence of "Severance" spreads through all Korea, thus the Christian doctors and nurses of the Korean Church are being trained to "carry on."

We have found our friends even in Seoul do not comprehend the work done in "Severance" and we welcome this opportunity to present the work to all the readers of the "K. M. F." We seek understanding, cooperation, and genuine interest in our work—it is not only "ours", it is *yours* and we are your representatives on the job.

Present Problems

J. D. VANBUSKIRK, M. D.

1. Financial Problem.

LET US TAKE the easiest problem first. The total expenditures for the work (excluding missionary support, cross entries and business departments,) during the past year were ₩ 205,440.55. The Boards and Missions gave a total for budget purposes of ₩ 30,535.23 and special donations and donated supplies from the home-land amounted to ₩ 33,766.49, or approximately ₩ 64,000.00 from the church at home leaving ₩ 140,000.00 to be raised locally, i. e. the work is more than $\frac{2}{3}$ self-supporting. It is no easy task to raise ₩ 140,000.00, and last year was one of financial stringency owing to crop failures from both floods and drought in different sections of Korea.

There were at least 67,305 treatments in the out-patient department and out-calls last year and, excluding the support of the missionary doctors, the average cost was ₩ 1.00 each treatment, including medicines, dressings, upkeep of buildings, and salaries of Korean assistants. 29,638 free treatments were given and medicines furnished, that is 44% of this work was charity.

The Hospital shows 49% of its work to have been free. There were 13,670 in-patient days for which the patients could not pay, out of the total of 27,898 days. 649 charity patients stayed in the Hospital an average of 21 days each, compared to 9.5 days in the case of folks who were able to pay for their care. These poor folks needed to stay longer for they were in poorer physical condition when they came and needed longer time for recovery, and they can not care for themselves so soon after leaving the Hospital. The average cost per patient per day last year was ₩ 2.66 (excluding missionary salaries), compared to the average for U. S. ward-patients \$4.64.

It will be seen that our charity work in the O. P. D. and Hospital at the average rate per

day and per treatment, cost "Severance" ₩ 66,000.00 besides the service of the missionary doctors supported by the missions. Even granting that "charity cases" did not receive as much in service as the others, the cost of this service can not be less than ₩ 50,000.00 plus the support of the missionary doctors. This ₩ 50,000.00 to 60,000.00 has to be found somehow. The "pay-patients" paid an average of ₩ 3.18 per day, so that they gave a small margin to help with the cost of the charity-cases.

It is well known that it costs more to run a medical college than the students can pay in fees. It took ₩ 20,000.00 plus the missionary salaries to make up the cost of the training of 70 medical students. The service rendered by the student nurses is considered to offset the cost of their training.

There is no real hope of making the Hospital, O. P. D. or Medical College self-supporting. It can't be done in the U. S. if any charity work is done and it can't be done in Korea. The similar institutions in the homelands receive millions for plant and have large endowments and receive large support from the constituent churches. "Severance" not only needs money for enlarged buildings, but it urgently needs endowment. We feel there are future possibilities in the way of support from the Korean church, but that can only come to any large extent after the church is able to support its regular work as it can not now.

"Severance" has undertaken some business ventures with the purpose of turning any profits into the support of the clinical work. The Optical Shop is making a nice profit, about 20% last year. The retail store, "Severance Pharmacy", is as yet in the process of paying for its building and stock, it has no profit to turn to the other work. The Wholesale department, "Severance Wholesale

PRESENT PROBLEMS

Medical Supply Co.," has good prospects of profits; we have lately succeeded in getting agencies for some of the best firms in the U. S. and get real Wholesaler's discounts for the first time. But for reasons not yet clear, we got no profit from this business last year.

It is not unusual to hear complaints and criticisms that "Severance" charges are "too high" and the service poor. We are conscious of deficiencies in the service but we also feel there is no better available here and we are striving to more nearly meet the needs. When our friends realize how hard it is raise ¥ 140,000.00 a year perhaps they will be more tolerant of the charges. The fact is that "Severance" charges not "high" in comparison with similar institutions, and that "Severance" has had to borrow several thousand yen to carry on the last year.

This financial problem is easiest to solve for money can answer it.

2. *Problem of Housing a Work Too Big for the Buildings.*

The Hospital was not originally planned for patients in the basement, but the demands of the sick have been so great that 35 beds have been crowded down there, most of them being for free cases. A building planned for 40 beds now has 75 in use. The hospital averaged over 80% of capacity all the year. The free wards are nearly always crowded. Miss Roberts says it is hard to keep the beds clean when folks are waiting for another to leave, when a new patient occupies the bed before it is cold. There is no more serious strain on the workers than to turn away needy folks from the Hospital because there is no bed and yet this is our common experience. Patients have waited weeks to get a chance to enter the Hospital for needed operations. Patients have crowded out needed service rooms. Anyone seeing the Hospital will realize the need for more room.

The throng of sick folks and their friends in the O. P. D. fill all the available space; there are over 200 sick folks there every day. The latest attempt to relieve the crowding is to

begin seeing cases at 9.00 in instead 10.30 as formerly and so to distribute the crowd through a longer period. This has helped some. But the doctors are all cramped for working space and waiting patients are crowded together, rich and poor, men and women, clean and foul—and sometimes the latter make it unpleasant for all the others—all have to wait together.

The Medical College could well use all the building that now houses also the O. P. D., business offices, and Wholesale Drug business. We really have but one lecture room for the Medical College, Anatomy has taken over part of the unfinished attic for its work, Biochemistry and Physiology Laboratories are in almost constant use for lectures, the Pathology Laboratory does also for Histology, Biology, and general lectures as well as post-mortems. Chemistry and Pharmacy have been crowded down into a dark room in the basement.

Yet for all the needs of the Medical College and O. P.D. we put first in order of urgency, the need for more Hospital room. A gift of \$100,000.00 is available for starting a new hospital but we dare not enlarge the hospital without endowment or other funds for current expenses.

This housing problem is fundamentally a financial one; but it also is one of organization and staff, so as to utilize the space available to best advantage. We are proud that visitors who know medical work all over the world, have paid "Severance" the compliment of saying they never saw more work in an equal space and more complete utilization of every available bit of space.

3. *The Problem of how to make a true Christian Impress on the Crowds.*

There is a crowd of 250 sick folks in the O. P. D. every day all eager to see the doctor at once, they are not "long" on patience and many of them are "short" on ordinary intelligence; the clerks know that if money can not be secured from these folks there will inevitably be a deficit, they also know some of

them are able to pay and lie to try to get free treatment. Under such conditions it is hard to uniformly "keep sweet". We are sorry and ashamed that there are too many failures in Christian courtesy.

The patients and their friends have only one fixed idea, that of getting the best treatment they can as soon as they can. The doctors, nurses and clerks are all rushed in their efforts to treat the throng, and to satisfy the demands—often unreasonable—Christian love is put to a sore trial. It would be easy to excuse some failure in making the true Christian impress. We fail greatly in "buying up the opportunity", yet there is much of Christian kindness shown, and many folks helped to realize a little of God's love in Christ Jesus.

There is a better opportunity to make a real impress on the folks in the Hospital. Doctors and nurses and others are not so hurried and the patient has time to listen. The patient kindness of nurses and the evident sympathy of doctors, warm many hearts and Jesus is better known. An old woman after 3 weeks in the Hospital said to the nurse on leaving, "I am just an ignorant old woman, I don't know anything about the doctrines, but if the Jesus doctrine makes folks treat others as you all have treated me, I want to follow the Jesus way." Even the expression of her face had been changed and sweetened in the 3 weeks contact with Jesus in the form of Christian doctors and nurses.

With over 2,000 patients in the wards and 70,000 in the O. P. D. every year "Severance" offers an unsurpassed opportunity for personal evangelism.

"Severance" employs an ordained pastor evangelist and two Biblewomen. These talk to patients and help them get the attention desired and then give tracts and gospels and speak a word for Jesus. They thus preach to hundreds every month, and the seed will not all be lost. They also follow patients to their homes after recovery and renew their interest. In the year they report 320 men and women actually joining the churches near

their homes. It is in this follow-up work that the church will reap from the sowing.

We have just received a new gift to enable us to have a second evangelist, so the men can alternate their work of follow-up, as the Biblewomen now do.

We crave your sympathy and help in this difficult problem that money cannot solve, only the abiding Christ having His way in us can make the impress of the work and workers truly Christian.

4. *The Problem of Training Doctors and Nurses for Christian Service.*

We have no real interest in training simply doctors and nurses in "Severance". We are vitally interested in training Christian doctors and nurses. We want students with a Christian motive, not just a selfish ambition or simply the purpose to be good doctors and nurses. Only the best is worthy of being called Christian so we must give the best medical and nursing education possible for us to give. We also feel that a Christian doctor or nurse is a better doctor or nurse than others, they have resources and power beyond others.

Of the 70 medical students only 4 are not baptized Christians, all the nurses are members of the church. Many of them have the real Christian motive in their studies; they desire to fit themselves to serve their people. I doubt if many have much idea of serving the church, though all expect to be loyal church members and do their part—The common idea of only ministers and Biblewomen being church-workers is found among them too.

We have daily chapel exercises and the attendance, though voluntary, is good. Up to the last year, we have had Bible classes outside hours, and they have done real good. This past year we have had Bible classes one hour a week for each class, during the regular periods and, of course, the attendance has been better. Dr. McLaren conducted a class on the Life of Christ for the Freshman class. Rev. Pyen Sung Ok has had a class for the Soph-

omores, taking up the O. T. Prophets with them. I took the Juniors and Seniors together for most of the year, studying with them problems and questions about the Christian religion. Dr. W. M. Clark discussed with them questions about the Bible. Rev. E. W. Koons took up devotional studies from the poetical books of the O. T. We all feel these classes have been helpful to an intelligent faith and inspiring to Christian life. This year we will have still other leaders for discussion periods, and we plan to take up for their last lessons the gospel of John and once more bring them face to face with the Master.

The nurses have their Bible classes, and they show a sweet Christian spirit in their daily life. They and the medical students regularly attend church. Many of them are active in church and Sunday School.

"Severance" has graduated 141 doctors and nurses to date. There have been some shipwrecks of faith and failures in living worthily of the Name. There have been others of little positive power for Christian uplift in their community. But most of them have held fast their faith and are real factors in the uplift of their communities. Some of them are glowing Christian workers, second to none in their power and influence for good and their Christian zeal. We would rejoice that all were as these, but we thank God and take courage as we think of them.

Money can not solve this problem. Only Spirit-filled men and women leading the students can fulfill this opportunity.

5. The Problem of Promoting Korean Co-operation and Ultimate Devolution of Missionary Responsibility.

Ever since the incorporation of the "Severance" Board of Managers Koreans have been members of the Board. There are at present 10 Koreans on the Board out of a total of 29 members. Their service as members of the Board has been a real contribution to its work, but it is only fair to say that their part has been a minor one to date. We have desired that they should feel "Severance" to be theirs,

but it is hardly a reasonable desire so far. The land and building have all been provided by Americans. Mission Boards make large annual grants to its maintenance, most of the administrative authority is in missionary hands and missionaries are in the majority in the Faculty and Board of Managers. It is only natural for the missions to act as if "Severance" belonged to them and for the Koreans to feel that it is something the missionaries began and use to serve the Korean people. Until more administrative responsibility and the majority of teachers and managers are Koreans, we have no right to expect them to feel it belongs to them and to their church.

We need not expect much Korean financial support for a missionary-controlled institution. Yet it may do us good to know that ₩ 100,000.00 of our income last year came from Korean purses, while the missions and church at home furnished only about ₩ 160,000.00 including the support of the missionaries.

We have at present 6 Koreans as full members of the faculty and 4 others as teaching assistants now. Dr. C. S. Kim, one of our graduates, has spent over 4 years in the U. S. and has graduated from Johns Hopkins School of Hygiene and Public Health with the degree of Doctor of Public Health (D. P. H.) He will take his place on our faculty in October this year. Dr. Y. S. Lee has just graduated from Northwestern University Medical School and after a year of further study will return to work in his Alma Mater. Dr. Y. O. Choi has received his B. S. degree and is now in Emory University Medical School, we expect him later to join our staff. Dr. H. Y. Oh, son of our well-known Dean, has been elected President of the Korean Students Federation in the U. S. A., he is now studying in Emory University Medical School to prepare for work with us. Also during the year Drs. Paul Choi, M. U. Koh, and S. W. Rhee took courses in the Peking Union Medical College. The above are all graduates of our school and will in a few years have leading places on our

faculty. Dr. H. S. Shim, one of our teachers, has spent the last year in the Tokyo Imperial University, his second year there. Dr. S. H. Hong, one of our first graduating class has been granted recognition by the Government as a "full professor" after his year in the U. S. We plan to send others for post-graduate study in the near future, thus to build up a strong Korean faculty.

Besides these of our graduates, we have strengthened our staff during the past year by the addition of Mr. K. Y. Lee, a graduate of the University of Ill. Pharmaceutical Department. He teaches Chemistry and Pharmacy. Dr. Y. S. Koo, M. D. from Emory University, is in our Department of Pediatrics. Mr. L. K. Jung, who was trained in the U. S. Army Medical College and spent several years in U. S. Army Hospitals as X-Ray technician, is now on our staff.

The salaries paid to our Korean doctors are not high, most or all of them could earn far more in practice. They prefer loyalty to sacrifice for their people's good and to render their service for the Master's sake. These are worthy colleagues of missionaries.

Without the faithful and highly efficient work of our graduate nurses, we could not carry on now. They are taking responsibility as head nurses and some are teaching. The future is in their hands.

Some of us older missionaries will soon see these our professional "sons" take our places and thus have our joy made full. Then the problem will be reversed, it will be how can Missions cooperate with them—Speed the day!

The past year has seen a big step in Korean

cooperation. The Koreans in their confidence in "Severance" have turned over to us more than ¥ 12,000.00 in cash, and a large subscription list, for the erection of an Isolation Building. This building is now nearing completion. This is the first large gift of Koreans to a missionary institution in Seoul, may it be the first-fruits of a large harvest! And may we missionaries have the grace to yield the first-place as soon as the time comes and the vision to see when "the time" has arrived!

6. *The Problem of Public Health Education.*

Up to this time "Severance" has not had a program of health education outside the institution. Some booklets on hygiene have been written, some lectures given and some public health work has been done, but in no systematic way. The time is ripe for a forward move in this line. "Severance" owes it to the community to make better known the ways of healthy living particularly is it needful to promote health education in the mission schools for boys and girls.

I have not looked for work to do, yet I felt I could wait no longer to start this work. So last year I gave a weekly lecture to students of the Methodist Theological Seminary on Science and Health. This year I have added two more schools to my list and expect soon to have a book on Healthy Living in print for the students. I have also given occasional lectures on the same line to other groups, and others of our faculty have done likewise.

We feel it is providential that Dr. C. S. Kim comes to take up Public Health Education as part of his work. We expect to make an impress for good on the students of our church schools and through them on the whole people.

Plans for the Development of "Severance".

J. D. VAN BUSKIRK, M. D.

MANY HINTS of these plans are to be found in the discussion of Present Problems. Let us briefly summarize them here :

Our President, Dr. O. R. Avison, has been in America for over a year promoting these plans. His successes have not been small, though as yet quite inadequate. He is seeking for \$1,250,000.00 for buildings and endowment for "Severance". He has received a gift of \$100,000.00 for the first Wing of the New Hospital from Mr. J. L. Severance and Mrs. F. F. Prentiss, son and daughter of the donor of present plant, and they in their own interest are continuing the work begun by their father. These friends have also given \$7,500.00 for land, and are giving \$10,000.00 a year to the current budget, and in other ways helping on the work. They rightly feel that "Severance" is a "Union" institution and should receive support from others. Word has also come of individual churches taking responsibility for parts of the work and the campaign now on should result in many gifts for "Severance" large and small.

The second large property item is for additions to the Medical College and O. P. D. building; three extensions are planned and they will cost about \$138,000.00. They will provide for a school of 150—200 students and 500 patients a day in the O. P. D. A second wing to the Hospital is planned to cost \$80,000.00. Additions to the Nurses' Dormitory are imperative, they will cost \$20,000.00 for each of 2 additions to be built when the Hospital wings are erected.

We have no dormitory for Medical Students, so the boys have to room and board where they can. We want \$25,000.00 for a dormitory for them. Homes for missionary

and Korean teachers are needed, \$50,000.00 will be required to meet this need. Other buildings, such as kitchen and laundry and chapel are needed, too.

The biggest single item in the program is for endowment, we need at least \$500,000.00 for this greater "Severance." As stated before, we can not go on with the enlargement of the Hospital even though we have the money for the building, until endowment or other income is provided. The glory of our work is that the poor are ministered unto, and we can not do more of this without more income.

The plans call for a Medical College taking in 50—60 students each year, with a total enrollment of 150—200. They can be taught with but little increase in staff as easily as we now teach 70, if we have rooms adequate. We can now only admit 20 students a year for want of class and laboratory rooms. The enlarged Hospital will accommodate about 200 patients, and will enable us to render a much better grade of service to all. But we may frankly admit that we can not expect the fees from patients to carry the enlarged work. Hospitals in the homelands do not so expect, nor can we.

We do not expect all the money for this development to come from the homelands, we expect part of it from Koreans, as they have made a start with the New Isolation Building. We expect to make "Severance" more truly theirs and some day, not too far distant, the Korean Christian church will have her sons and daughters doing the work and carrying the responsibility of "Severance". The Korean Christian will manifest the spirit of his Master who could not leave the poor and sick to suffer but "took upon him our infirmities and bare our diseases".

Honor Your Profession*

BY A. I. LUDLOW, M. D., F. A. C. S.

THIS DAY IS UNIQUE in the history of our institution. The graduating classes of the Severance Union Medical College and the School for Nurses, unite for the first time in their commencement exercises.

"The end of the exploration is the beginning of the enterprise." During the past years you have been exploring the realms of Medicine and Nursing. Now you are ready to begin your profession. You have completed your course of prescribed study but you are only at the commencement of your career as doctors and nurses. My task will be accomplished if you remember only the subject of this address: "Honor Your Profession".

I. *In the first place, Honor Your Profession because of its history.*

From the time when the Great Physician, "went about doing good" to the present day, Medicine has had a wonderful history, especially during the past fifty years which have been marked by amazing advances in every line of medical research. The history of Nursing, though not so well known, is of great interest. Its evolution was brought about mainly by three causes, namely; (1) Religion, (2) War, (3) Science.

It was religion which first induced ladies in the earlier centuries of Christianity to take up the care of the sick as a charitable act. It was War which prompted Florence Nightingale to proceed with the nursing of the sick and wounded soldiers. It was Science which further revolutionized nursing, increasing the dignity of the calling, inducing persons of a superior class to enter it, enlarging the demand for their services and multiplying the means for educating them. Honor your Profession for its remarkable history and for the honorable names connected with it.

II. *In the second place, Honor Your Pro-*

fession because of its present day accomplishment.

Before the days of Pasteur and Lister operations even though simple were attended with a frightful mortality. Whenever the surgeon operated in those days Death stood by waiting his toll. What a difference today! The head, chest, abdomen, and even the heart (so near the surface and yet for hundreds of years out of the surgeon's reach) are operated upon with comparative safety.

Not only in Surgery but also in Medicine we are constantly being encouraged by new discoveries such as Insulin. The latest is that scarlet fever is no longer to be dreaded, many cases being reported cured in an astonishingly short time by Dr. Dochez's serum.

Nursing has become such an integral part of Medicine that it is difficult to imagine what the profession would be without it. Do not the responsibility of the preparation of a patient for operation, the care of the operating room and the after care of the case devolve upon the nurse? Who would choose to treat such cases as pneumonia, typhus, typhoid and many other diseases, without the aid of a nurse?

The part played by the doctors and nurses in the World War brought great honor to their professions. Both were decorated for valor but not all the heroism was confined to the battle fields, for in out of the way places, many a nurse, left even without a doctor, performed her task with unbounded faithfulness and devotion. Honor Your Profession because of its present day accomplishments.

III. *In the third place, Honor Your Profession, because of its future opportunities.*

Emerson said, "Every great and command-

*Address to the Graduating Classes of the Severance Union Medical College and School for Nurses March 23 1925.

HONOR YOUR PROFESSION

ing movement in the world is the triumph of enthusiasm”.

Enthusiasm there has been in the past and is at the present, but how great should be your enthusiasm as you face the future. Step by step mankind is being freed of disease and you must have a part in this onward movement in Chosen.

One of the great opportunities which presents itself to you as doctors and nurse is that of assisiting in the preparation of others for your profession. Our President, Dr. O. R. Avison recently wrote, “Let us make teachers to teach the doctors and nurses”.

Another opportunity awaiting the medical man and nurse is the translation or better still, original articles or books, relative especially to the medical and nursing problems of Chosen.

The fight against tuberculosis, the eradication of leprosy, the problem of intestinal parasites, the investigation of native drugs and remedies empirically used for so many hundreds of years, the study of the prevalence of disease in Chosen; do not these afford a great chance for the sanitary expert, the bacteriologist, the pathologist, the parasitologist, the internist, the surgeon, and last but not least the nurse? Indeed it will not be many years before Public Health work will call for the nurse who desires to serve her community. Soon the visiting nurse will become an important factor in any program for the protection of the Public Health. This is especially true in any effort to save the lives of mothers and children. These are only a few of the many fields of service open to the doctor and nurse but I trust they will serve as suggestions for thought and inspiration, Honor Your Profession because of its future opportunities.

Above all you can truly honor your professions only by regarding them as consecrated service, whatever form that service may take. Pervading it all must be the spirit of Him

“Who came not to be ministered unto, but to minister”.

True success is dependant upon a source higher than all our knowledge.

“Ask of God to give thee skill in comfort’s art,
That thou may’st consecrated be and set apart
Into a life of sympathy;
For heavy is the weight of ill in every heart,
And comforters are needed much
Of Christlike touch”.

Severance Pharmacy

SEVERANCE PHARMACY, 115 Nandaimon Dori, the first and only American Drug Store in Korea, was opened for business December twentieth 1923. The store is the fulfillment of a long cherished dream of Dr. O. R. Avison.

Two years ago general drugs were sold through a small back door of the drug department where supplies were piled on shelves invisible to the customer. To-day supplies are sold over show cases by trained salesmen who know the value of rendering the customer the best service possible.

The aim of Severance Pharmacy is to conduct a scientific drug store that will meet the needs of all people in Korea. Its policy is to assist the doctors by carrying a line of sick room supplies, to furnish the general public with standard drugs, household remedies and toilet supplies.

At present over sixty percent of the customers are Koreans. This accomplishment is remarkable for the first few months because our endeavor is to sell the Korean public our own manufactured and imported products giving them pure drugs. Our percentage of customers speaks well for the desire for pure products.

A portion of our profits is to be given over to Severance Hospital and the clinics so that they may carry on a more extensive free work. Our business is new, we want to grow, help us with your suggestions.

Medical Work in Severance Hospital and Clinic

W. R. CATE, M. D.

SOMEONE HAS SAID that when you are face to face with a difficulty you are on the verge of a discovery. For some time at Severance we have been faced with two difficulties, one, the lack of adequate space in which to do our work, and the other a shortage of beds in the hospital. The discoveries made following a study of these two difficulties are, that one small room divided into equal halves makes two smaller rooms of equal dimensions in each of which double the original amount of work can be done; and secondly, that whereas one patient can get well in a bed by himself, two patients can get equally as well in the same bed at the same time, thus doubling the capacity of the hospital. Now no one will deny but that these are great discoveries and will lead to marked economy in the maintenance of the institution. Of course, as in advances made in any line of human endeavor, these discoveries bring with them added responsibilities. In these instances the responsibilities are of a peculiar nature, in that they make it necessary for the physicians occupying the dissected rooms to hear and understand what is being said in each room on either side, and at the same time correctly interpret what his own patient has to say. This of course leads to an improvement in his powers of concentration, very necessary in one doing such delicate work. It makes it necessary to put patients with marked physical differences and different names in the same bed, in order to avoid mistakes in administering medicines and getting the wrong patient for operation.

Dr. Avison Sr. was explaining the Severance method of growth by division to a guest who was visiting the plant, when the guest replied, "Yes, I understand that that is the method of growth of the lowest forms of life." But even after that, the division goes steadily on.

In the clinic there are many different departments, surgical, eye, skin, ear, nose, and throat, children's diseases, neurological, women's diseases, medical, and dental. Associated with all of these departments are the X-ray department, clinical and pathological laboratories, and the drug room. These various clinics work as a unit, each one acting as a consultant to the others when needed.

The medical clinic is composed of four consulting rooms, a clinical laboratory, and a large waiting room. The space is entirely inadequate for the amount of work done, and the best work cannot be done under the present arrangements.

There are three Korean doctors and one foreign doctor in the department during clinic hours. During the past year the Korean associate professor of medicine has been in Japan taking special work, and will be back this fall to resume his duties.

The hours in the medical clinic are from nine in the morning to one-thirty in the afternoon. From two-thirty the medical staff is engaged in attending hospital cases.

What types of cases are seen in the medical department? This might more properly be called the department of Internal Medicine, as we see cases with diseases of the chest and abdominal organs only. The average attendance is slightly in excess of one thousand patients a month. The four main types of diseases seen are tuberculosis, heart ailments, kidney diseases and diseases of the digestive system. It is difficult to describe the scenes that are enacted daily in the medical department. Many of the patients are in the last stages of their disease and are struggling for each successive breath, some are too ill to sit alone and are held by a friend. Here and there stretched out on the floor are patients too ill to sit up, and thus the picture could be lengthened indefinitely. One of the most discouraging phases of medi-

MEDICAL WORK IN SEVERANCE HOSPITAL AND CLINIC

cal work in the Orient is the fact that so many of the patients come too late in the disease, making it impossible to do more than give them temporary relief.

In addition to the clinical work carried on in the various departments, there is a certain amount of instruction for the senior and junior students that must be done. Four students, two seniors and two juniors, are appointed to the medical department each month and are there from ten to twelve daily. This is one of the most important phases of the work at Severance, and at the same time one of the most interesting. The object is to give these men a thorough course in the art of meeting patients, getting a useful history from each case, acquiring proper technique in their physical examinations, finding the essential facts about each case, and making correct interpretations of what they find. Upon the success of this work in the various clinics depends to a large extent the success of the medical college.

It is not at all possible for the doctor in charge of any clinic to see all the patients who attend his clinic, so in the final analysis he becomes a consultant to his Korean staff. That it as should be, since it allows him to see those patients who need him most, and develops confidence in the others when they are allowed to see patients by themselves.

In this work, in addition to its serious side there many interesting situations that come up from day to day. Recently four nations were represented in an attempt to solve the question as to what was wrong with one of the number. A Chinese student, who could speak neither Japanese, Korean, or English, was sent by a missionary under the care of a Japanese student who could speak Chinese, but could speak neither Korean or English. My interpreter was a Korean doctor who could speak Japanese, but could speak no Chinese and very little English. So here was the situation. A Chinese speaking to a Japanese in Chinese, a Japanese interpreting the Chinese to a Korean in Japanese, the Korean interpreting the Japanese to me in Korean, and I was translating the Korean into English. After the conversation was over, the only authoritative information I had as to what was wrong with the patient, was that he had pointed to his stomach while talking to the Japanese. As is usual in those cases where the cause of a

patient's trouble is unknown, an abundance of medicine was given and in the course of time, an unexpected recovery was achieved.

In the college the head of each department gives a series of lectures on the work in which he is engaged. This, while not so time-consuming, is an important duty and one that requires a great deal of preparation. The medical lectures were all given through an interpreter this year.

The hospital serves as a clearing house for the clinic. Patients with acute illnesses, those with chronic diseases who are unable to attend the daily clinic, and those that require study before a diagnosis can be made are admitted. Many patients who need hospital treatment cannot be admitted because of a lack of bed space. It was necessary recently to keep two children in the same bed for days because every bed in the isolation ward was occupied. On the average in the medical clinic alone, ten patients are turned away daily that need hospital treatment and need it badly.

As stated previously, medical rounds in the hospital are made in the afternoon, and it is at this time that medicines are ordered, cases studied, and treatments requiring medical supervision are carried out. Patients admitted during the morning clinic hours are examined in the afternoon, and where possible, a diagnosis made the day the patient is admitted and treatment begun at once. Many of the cases require further X-ray and laboratory work and repeated examinations before a diagnosis can be made. All of this work is done as far as possible the following morning. Every effort is made to cut the patient's stay in the hospital as short as possible.

All of this work requires time, and leaves little leisure during the day. But it is interesting, even fascinating. Probably the most interesting phase of it all is to see a green freshman come in begin at the bottom, and at the end of four years come out at the top a doctor. There is no more surprising thing to one who has not been associated with Korean doctors than the natural ability of these men. They make splendid physicians, and the most hopeful aspect of the medical work in Korea is just this fact. The needs of this land can and will be met by Korean doctors themselves.

Lessons From the Neurology Clinic.

C. I. McLAREN, M. D.

A PATIENT CAME to the Neurology Department the other day. His whole bearing stamped the diagnosis. "Sinkung-soi-yak" the Koreans call it—an exact translation of our own high-sounding but not very sensible term "Neurasthenia." He told us his troubles, and they were many and grievous. They illustrated in striking fashion what "real" trouble is, and how little the reality of a trouble may be related to mere physical abnormality.

This patient was distracted with burdens and anxieties about his career. He could not study; he had been advised that study would debilitate his (supposedly) weakened brain. This restriction, with the consequent frustration of his ambitions, made life almost unbearable. Others he saw in the path of progress; to his morbid fancy, his own mental life seemed little advanced beyond the brute-creation. During the course of the consultation it transpired that the patient had for some time been the victim of a serious lung affection. By mere physical estimates that was the real trouble for it seriously prejudiced the man's health, possibly his hope of life; but about it the patient, who a moment before had been torn with a desperate anxiety about ills which others might deem and dismiss as imaginary, was entirely philosophical. "Well", he said, "should I die of this lung trouble I can but die and that's the end of it."

After all a man's real troubles are the troubles that *hurt him*. If we are taking account alone of physical and physiological abnormalities we are missing that which is most important in the patient—for "there is nothing great in man but mind."

For this reason it is essential that a proper place be found in the medical school curriculum and in hospital practice for the teaching and practice of psycho-therapy. The work of our

department reveals how exceedingly common in Korea are those cases commonly referred to as neurasthenia or "Nervous breakdown." It has brought home to us the essential similarity of Korean mentality with our own. Those same mal-adjustments concerning sex, livelihood, disappointed hopes, responsibilities which have been demonstrated as the potent causes of neurasthenia in the Occident are seen exercising a like baneful influence with like results here in Korea.

The Christian message declares emphatically that humanity is a brotherhood; that there is in Christ neither Jew nor Greek, bond nor free. Selfish national or racial pretensions have often sought to assign to alien peoples a mentality incapable of functioning similarly with our own. The work of the neurological department in a foreign land adds its quota of proof to the truth of the Christian message of human brotherhood. Proved to be alike in their causation, cured by the same means, these abnormalities show the like workings of our common human mentality. They demonstrate also the power of the Christian good news to meet the needs of men.

We are still without a building or even a special ward for the treatment of the insane. It is a very great and urgent need. In Shakespeare's day the despairing question was asked "Physician, canst thou not minister to a mind diseased?" In our day sympathetic care and wise management of the insane has demonstrated how large a proportion of these unfortunates may be cured. In the days of His flesh the Master cast out evil spirits: to His missionary messengers He committed a like authority. If we are to prove ourselves in the true line of this apostolic succession it is for us to apply ourselves to this task.



"BEAR YE ONE ANOTHER'S BURDENS"



OUT-PATIENT DEPARTMENT WAITING ROOM



SEVERANCE PHARMACY



GRADUATES AND STUDENTS OF NURSES TRAINING SCHOOL, 1924

Severance From Outside and Inside

A. H. NORTON, M. D.

ALTHOUGH I HAVE spent the major portion of my life in Korea on the outside of Severance, I think I can dispose of that part of it in a very few sentences. It used to appear to me when I lived in the country and came rather infrequently to Seoul that Severance was a very slow place to get either a satisfactory interview with the doctors or any kind of business transacted. There were endless interruptions of every conversation, and it seemed almost impossible to complete any business satisfactorily. Nevertheless in comparison to my small hospital in the country the place seemed large and doing a great work and consequently the men in charge naturally loomed large and seemed competent specialists. Some contact with the students trained there gave me the impression that, however lacking the didactic course might be, they had had sufficient experience to make them efficient. More and more the impression grew that the method employed in Severance was the proper way by which we medical men from America were to make our influence felt in something approaching a permanent way. Although there were also other considerations, my desire to participate in this work began when I realized this unique opportunity and responsibility, and from then on I have tried to qualify myself to pass from the outside to the inside and partake of the opportunity and responsibility of impressing the students who come under our care with right moral and professional ideals. In other words help make Christian doctors, while treating suffering humanity with professional thoroughness and Christian sympathy.

And now from the inside how do things look? Generally speaking pretty much as they did from the outside. The pressure of business makes it impossible to attend to everyone as promptly as we or they could wish, and there is a good deal of lost motion

and wasted time. We are subject not only to our limitations but also to those of our helpers whose knowledge and ability need the constant supervision which only we ourselves can give; and it all takes time, and as we all know there is only a limited amount in any one day. I think however it may be said that our handling of the many-sided business which is carried on under our roof is improving and that as a rule we do not demand more than a reasonable amount of patience on the part of our patrons.

From the outside I have no doubt there is a demand for a separate clinic for free patients, and we are not unmindful of the advantages to be secured from such a plan. Many of our foreign patients are loath to enter through a corridor crowded with patients who from appearance might be the bearers of all sorts of infections. Though we who have become accustomed to this sight fear it very it very little, we do not blame our sensitive patrons, and the matter of providing separate accommodations has been and is the subject of consideration and waits only on the receipt of funds which make it possible.

The eye department as a separate entity was set off from the former Eye, Ear, Nose and Throat Department on my return from America two years ago. Since then I have been endeavoring to get it equipped to function as a teaching clinic. This involves not only apparatus and assistants so that the patients may be quickly and adequately waited upon, but also time and space in which the typical and instructive cases may be demonstrated to the students,—for it should not be forgotten that after all the making of doctors is our main business, and ought not to be slighted in order to see a few more patients. Although instruction in the Diseases of the Eye is given in a course of lectures four times a week extending throughout the Junior year,

the real test of efficiency comes when the student is confronted with the patient and asked to diagnose his condition and suggest treatment. Our junior and senior students are scheduled to spend the second two hours in the morning in the various clinics to observe what is going on and help as they may, but to make the most of the great opportunity which is easily ours, the head of the department ought to have this time free with the students to demonstrate to them what he has been trying to teach them in lectures. Last summer in comparing notes with Peking Union Medical College, it appeared that we have about twice as many eye cases in a year (about 7,500) as they do. The wonderful opportunity of making students well acquainted with all the common eye conditions is thus at once apparent. It is for this reason that I have often refused appointments with private patients, especially foreigners during these morning hours, and although I have broken the rule when the students were not in attendance as usual, I will consider it a favor if foreign patients will not ask for dates in the forenoon. I might also say that while I try to be accommodating, knowing that most foreigners in this country are as busy as I am, to insure attention at the time of calling it is necessary to have an appointment.

A great many eye conditions require hospital treatment. Inflammations of the eyeball and operations on the eyeball ought with very few exceptions to be treated in bed, but owing to the limited accommodations in our hospital we are able to enter not more than half of those we send up. I suppose this ratio is true of the other clinics as well, and, if true, gives some idea of the need for hospital enlargement. Seldom more than four or five from our clinic gain admission at one time. Most of the operating on the tissues around the eye is done in the clinic under local anaesthesia. Trachoma is probably the most common of all eye diseases and we try to give the students much practice in recognizing and treating it. It is a great menace to the eyes of school children

and those having schools in charge should be constantly on the watch.

In the practice of the average American oculist, cases of eye-strain calling for refraction probably out-number any other class of cases. Here, although inflammations of various sorts are now more frequent than refractive errors, the latter are constantly increasing as the number of students increases, and as those with poor eyesight learn that there is help for them. For this reason we are trying to give more and more attention to this class of patients, and have been able during the past year to add considerably to our equipment for this purpose. This however has not much speeded up the work of fitting the spectacles, but rather has added other and more accurate tests.

The proper fitting of lenses involves much more than successively placing different lenses before the patient's eye until he admits that he can see. It means first carefully searching the exterior for scar traces of former inflammations, scrutinizing the crystalline lens for evidence of cataract, and the entire interior of the eye for evidence of any disease which can interfere with the distinctness of vision, such as retinal or optic nerve lesions. Then with the aid of the so-called "shadow test" it is possible to determine the refraction of the eye with a fair degree of accuracy, making it necessary only to confirm the result by placing a few lenses before the patient's eye for his approval.

Following this, tests of the external ocular muscles (those which rotate the eyeballs into various positions) are made with a view to determine their relative strength and balance. Much eye pain and discomfort is caused by the weakness of one or another set of these muscles. Proper exercises are the rational treatment for these conditions but it is difficult to get them carried out and often resort to the wearing of prisms is necessary.

In certain cases it is necessary to put "drops" in the eyes before a satisfactory test can be made. The drops are intended to par-

SEVERANCE FROM OUTSIDE AND INSIDE

alyze for a time the ciliary muscle which controls the focus of the crystalline lens. This being only partially under the control of the patient, continually varies during the test making it impossible to determine the correcting lens.

Inasmuch as most of you are engaged in work calling for prolonged and often excessive use of the eye, it may not be out of place to say that as the seeing mechanism is under the control of muscles which partake of general body conditions, the general state of the health is of the greatest importance in relation to the eyes. To my mind it is mortgaging the future to use them excessively, when as we say, we are too tired to do anything else. Nearsightedness in children is a condition which requires special care lest it increase, and this care is the wearing of correctly fitted glasses and the limitation of near work.

Now it is easily understood that any amount of attention given to fitting glasses without the glasses, would be useless. It is therefore necessary to be able to furnish the glasses and often this should be done before the effect of the drops has worn off. The maintenance of an optical shop to fill the prescriptions of the oculist as quickly as possible involves, beside the technical skill of an optician, enough merchandizing ability to keep from laying up a loss for the institution. Fortunately we have a Chinese and a Korean trained in Peking by an American optician who are able to answer for the technical side of the business, and make very good lenses. Last year we added another grinding machine which facilitated matters a good deal. We try to give emergency orders precedence but it is often unfair to put them in ahead of other orders which are peaceably waiting their turn. It would therefore seem proper for one who is very dependent on his glasses to provide himself with a reserve pair in case of accident. This would avoid the S O S which I so frequently hear

and am sometimes unable to answer.

With the limit of capital at our command it is quite impossible to stock a very large variety of frames, but still we usually have on hand an assortment covering all the styles which are much called for.

Also by our direct relations with the manufacturer we are able, in spite of the luxury tariff, to provide glasses at a price not higher than that of the retailer at home.

We guarantee every pair to be according to prescription and free from flaw, but as long as we are dependent even in part upon the patient's replies to our questions during the fitting process, we can not guarantee the prescription. Also as none of our patrons wish second hand lenses, we cannot dispose of them in exchange. But as we give away a good many to people who cannot afford to buy, exchange lenses if left with us, may sometimes be put to good use.

In conclusion let me say that, despite its many defects seen both from without and within, the Severance Institution, in my opinion is rendering a great service, rather inadequately appreciated, both to natives and foreigners in Korea and through its graduates will continue to influence the progress and development of medicine for generations to come. It is, and increasingly will be, a great monument to Dr. Avison, and his early associates who, in the presence of difficulties and obstacles which would have overcome most of us, refused to be discouraged, but with incredible optimism campaigned for the institute in season and out of season. He is still at it and if his health and strength prove sufficient we will doubtless soon see a greatly improved and expanded Severance upon a solid foundation to be handed over in due time to trained Koreans whose talents as well as the institution will be dedicated to the moral and physical well-being of their countrymen.

Quiet Talks in the Dental Chair

J. L. BOOTS, D. D. S.

“**D**OCTOR, it's very difficult for us, here on the field, to get satisfactory dental work. We are a full day's ride from the nearest dentist and cannot always make the trip when we should, so that any advice on the care of our teeth will help us, and often save us a long and expensive trip. What are the dental troubles we should be most careful to avoid? I have heard so much about pyorrhea and am anxious that the children should avoid getting it. Is it contagious?”

“No, pyorrhea is not a disease of the teeth themselves, but of the tissues that surround and hold the teeth. It is not contagious, and so far as we know, is caused by a mild and chronic irritation to the gum, peridental membrane and tooth socket. It rarely develops until after middle age. The other kind of common dental trouble is decay of the teeth. It is the most prevalent disease in the world. It may begin soon after the child starts to eat solid foods but the age of greatest susceptibility is usually in the later childhood and immunity normally begins in early adult life. We can guard against decay by proper diet, and keeping the teeth clean.”

“What's the best thing to clean the teeth with?”

“A brush.”

“Yes, I know. But what kind of powder or paste?”

“It really makes no difference.” What does the work is water, and a good brush. The brush should be small, tapering at the front end, in order to reach the back teeth, for when the mouth is open wide the cheek muscles pull in so tightly that the brush cannot reach the back teeth.

“More and more dental work will have to do with preventative work instead of the repair work that we do now. People will be taught how to avoid dental decay and pyor-

rhea. You are representative of a large class of people who think they clean their teeth but look,—take this mirror and let me show you. You brushed them since breakfast just before you came to the office, didn't you? Yet, if I run this pledget of cotton around the necks of the back teeth, look at it. Or let me go between the teeth with dental floss. You see, they are not very clean, are they? You must not brush them across, but up and down, the uppers, down and the lowers up, being careful to reach the back teeth both above and below. Brush the inside surfaces, then the chewing surfaces, then the chewing surfaces, then the tongue, and massage the gums.”

“But doctor, they bleed if I do that.”

“All right, let them bleed. Get all that stagnant blood out of those inflamed gums. Get the necks of teeth scaled and cleaned, then massage the gums until the circulation is good. Use a small brush with stiff bristles.”

* * *

“Just look them over, doctor; I probably don't need anything, as I saw a dentist in America a few months ago.”

“There are three or four that need filling.”

“New cavities?”

“No, old silver fillings that need renewing.”

“I don't understand why they need renewing, nor why the dentist in America didn't see them, but of course, I want them fixed up.”

“One at a time, now. First, as to why they need fixing. They are only material, dead material,—silver. Silver is brittle and chips under pressure. You eat one thousand meals a year. Your shoes wear out; so do your clothes and hats; and it wasn't a good tooth when you began with this filling,—only a repaired tooth which is never as good as it once was.”

“Secondly, why didn't the dentist in America see it? He did. Several thoughts passed through his mind. You weren't a regular patient of his; you meant nothing to his

practice. More than likely he knew you were a missionary and could not pay a very large fee. He was busy with his regular patients. And even if this were not the case there is a question of just when to renew an old filling. It may look old yet may give service without decay for several years yet. It may look all right, but leaking at one spot under the gum may be all decayed underneath. At any rate, to be satisfactory, the margins of the filling should be tight and the surfaces smooth, polished, and continuous with the surface of the tooth. Some patients want their mouths kept in perfect condition all the time, while others, if I attempted to renew an imperfect filling before it caused pain would accuse me of deliberately drilling holes in order to create some work to be done. Notwithstanding the number of dentists that are accused of the latter, you may be sure, for every one time that a cavity is created, there are ten cavities neglected—ten or fifty."

"All right, will you start them now, please?"

* * *

"Why do you have to drill so much when the hole was already cut, doctor?"

"Because a cavity should be more than a hole. It should be cut to certain proportions, with a square floor, the inside angular and not round, the sides paralleled, the margins beveled, cut, and extended to high points or what we call clean surfaces, that is, where they will be brushed by food in chewing."

"Well, wasn't that done before?"

"No."

"Why? It doesn't take much more silver to fill one than to fill the other, does it?"

"No. The silver is nothing. But to prepare a cavity correctly, I may use five or six of these little steel burrs, none of which are of further use. These cost about seventy sen apiece. I could spoon out the decay with a hand instrument, leaving a round hole, bigger at the bottom to hold the filling. It would take less time, less expense, and not hurt you as much, so you would like it better. In a few months it will be useless, but by that time you would have forgotten which dentist did

which filling. However, that is not dentistry. That is not restoring a tooth; it is only filling up holes."

"Are two of those cavities between the teeth and right together?" "Can you fix them so they are not connected? So I can get dental floss up between them?"

"Yes, indeed; all fillings must be separated for each tooth should have a slight individual motion in chewing. The filling should restore the normal shape, contour and contact of the normal tooth. That contact, with its approximating tooth should be tight, but only a point, — not a flat surface."

* * *

"I wanted you to look at Mary's teeth. She's seven, you know, and her back teeth seem decayed. They are just baby teeth, and I suppose it's no use to fill them."

"That back tooth, Mrs. Blank, is her permanent tooth, the six year molar, and the most important tooth in her head, the four of them holding the jaws apart, while the baby teeth are being lost and the permanent teeth coming in. It is badly decayed, the surface undermined, and will be very difficult to save. I am sorry."

"Can't you take out the nerve and save it?"

"No, because the ends of the roots of that tooth are not fully formed until six years after the tooth erupts and no root canal work can be done before that time. That is, until she is twelve years old."

"And she really won't get another one if that one comes out?"

"I'm sorry, but she won't."

"Well, what would make her teeth decay like that? She brushes them."

"Are you sure she brushes them? Does she know how? Do you see that she does it thoroughly? How often? And how much sugar does she eat?"

"O doctor, my children get very little sugar. Really, less than the other children on the compound."

"Any sugar on her cereal? Any candy?"

"Not much candy. Of course, a little; perhaps one or two pieces a day."

"Well, that's sugar; any cake or pie? Any white bread?"

"Yes, they eat lots of white bread."

"That's the same as sugar for the teeth, But Mrs. Blank, there is nothing that the dentist can do. Every magazine is running dental articles these days. There are school clinics, and public welfare clinics. Every dental hygienist speaks against sugar, pastries, and white bread but we go right on giving it to our children. It's doubly hard for us on the mission field because the "amah" gives it to them when we don't know it, because she knows the children like it. You think the "amah" doesn't, but most often she does. Then, we think because our children have to have parties,—birthday parties, teas, all kinds of parties. I have never seen one yet that didn't have a full sugar diet for the children. (As I write this sentence, my daughter has just come in from a party; she greets me with this:—"Daddy, I just came from the party, and do you know what we had? We had cake and chocolate and ice-cream.")

"We cannot make the cook bake brown

bread or whole wheat bread that every authority on the subject tells us to eat because he knows he can bake good white bread and that's the test of a cook. He thinks brown bread not good enough for us anyway. And so it goes. You ask me and I tell you, You read the same thing in a magazine article, You read the same thing in a medical journal and hear it from your doctor. You see the Koreans all round you with no sugar in their diet and practically no decay and Americans, English and Japanese with decay in proportion to the sugar and pastry content of their diet. You would do anything for Mary. You wouldn't think of giving her poison or coffee or tobacco or alcohol. Yet her first taste of sugar candy establishes a habit far harder to break in the child than that of coffee tobacco or alcohol in the adult, and one which every single authority on the subject tells you is the cause of dental decay, which in turn causes pain, abscesses, secondary infection, rheumatism, arthritis, heart trouble, etc. But on Mary's next birthday, you'll invite all the neighbor's children in and serve them cake, ice-cream and candy and watch them have a good time!"

Social Derelicts, a Problem

J. W. HIRST, M. D.

WE ARE TOLD that in Korea, in the olden days, each tribal group was responsible for each and every member of its clan no matter where he might wander inside the confines of the country. Moreover this custom held good in sickness and in health, in misfortune or in death. If a man belonged to a family in one province and had moved to one far distant and there fallen ill, or gotten into misfortune and was likely to become a charge upon the public, the people where he was sojourning would discharge their responsibility by conveying him to the

confines of their own jurisdiction nearest to his ancestral domains and there setting him down in the village or town of their contiguous neighbors on that side, together with information identifying the man and telling where he belonged. These villagers in turn passed him through their confines to the next unit of territory, and so on till he finally reached the place where his responsible relatives lived. There he must remain and be cared for till health again returned, or death ended the chapter. If he died at any stage of the journey his body was forwarded just the

same so that his relatives might see to it that he was properly buried.

With the passing of time governments and customs have also changed. The man who now falls ill when away from home and friends unless he has money or influence at his command, can claim no rights, nor is it anyone's business to see that he is cared for. Has he lost out in the battle of life?—then begging is the easiest road to travel. Is it failing eyesight that handicaps him? Not even the government will find a place for him! Is it a child that is lost, strayed or orphaned? No one can be compelled to care for him, and he must beg, steal or starve. If the first he grows up in ignorance and shiftlessness; if the next he is likely to be thrown into prison and grow up a criminal; if the last he can but die and be out of his misery.

Many of these unfortunates gravitate to Seoul. Once here they will sooner or later hear of Severance Hospital where, when actually sick, they can secure aid and comfort until restored to comparative health. But after that what?—Usually they return to the former mode of living. If it is winter their plight is indeed pitiable!

Perhaps it is a workman from a distance, separated from home and his usual surroundings, that falls ill or is hurt while at work and is brought to the hospital. After his recovery what is to be done with him? Suppose he has lost a hand or a foot; who is to help him secure a livelihood now that he is a cripple? The local government is too busy with other problems to take note of these waifs and strays. They become therefore derelicts on life's highway! Are they worth salvaging? Sporadic attempts are being made to succor

some of them. Dr. Oh's orphanage helps some of the boys, but as yet no adequate means have been found to cope with this problem. The situation is bad enough now but I fear it will become worse rather than better in the immediate future! New dangers to life and limb and even new diseases are helping to swell this tide of incompetents. Any uncared for nook or corner along the streets is likely to harbor one or more of them. Frequently the hard stone front steps of the Medical School building become a sleeping place for some of these wanderers. When not actually sick or surgically ill there is no excuse for entering them as patients in the hospital. Although our sympathy is aroused and we recognise the need we must steel our hearts against them and join the stream of those who "pass by on the other side." A recent case in point was that of a man who has lost both feet from "gangrene." He was formerly a self-supporting workman, but now what is to become of him;—alone in the world, friendless, homeless and forlorn? This man, with care, could again become measurably efficient. His hands are capable. He has a willing mind. He is evidently able to learn some new method of self-support, but who will teach him, and where? Who will feed and care for him during the process! No place has yet been found to teach money-making trades to handicapped men. A self-help department is greatly needed in this connection, but before it could begin to function there must be found a man with power to visualize the need, a heart big enough to inspire the effort, and the requisite ability to handle the situation! Such a man could make himself a blessing to countless numbers of suffering mortals!



Severance Flood Relief Work

C. I. McLAREN, M. D.

WHEN THE FLOOD inundated the low-lying areas about Seoul, appeals were made on all hands for help and relief. Actual rescue work from physical danger was the first in order of urgency; food and shelter had then to be found; then came the call to cure and combat disease consequent upon or threatening from the disaster.

Under the leadership of Dr. K. S. Oh, plans were made to send out medical men, dressers and medical supplies to some of the refugee camps that had been formed. Actively co-operating in this work was the public-spirited "Tong-Ah Ilpo" newspaper. The newspaper had made itself responsible for the feeding of refugees and its representatives went with us as guides and rendered lay help in conducting the clinics. Two cars—our hospital one and another from the newspaper office,—set out daily on our round. No one could mistake our mission; let us hope we were not in fact at variance with that spirit of well doing which "allows not its right hand to know what the left hand does;" but it certainly is the case that large posters on the cars proclaimed to all and sundry that we were engaged on flood relief work.

The flood area was indeed a desolation; it reminded me of nothing so much as the devastated war areas in France: albeit nature had not been quite so destructive as warring humanity.

Our methods were necessarily simple: hundreds of patients had to be seen; and means of treatment were scanty. Of actual trauma from the floods there was surprisingly little; in the earlier visits there were a very large number of patients with feet raw and sodden from hours and days of immersion in mud and water. As might be expected exposure and bad food and water bore heavily upon the babes and little children. To some of us it looked as though the situation held all the makings of a severe epidemic; perhaps we did

not take sufficient account of the Korean resistance to disease, for the days passed and proved our apprehensions needless. They were busy days; often it was long after dark before we got back to Seoul; but the journey back brought with it some sense of a full day's work strenuously done, and the knowledge that relief had been brought to scores of sufferers. In all 1,215 treatments were given and the auto recorded 173 miles of travel on this mission.

One could not but be impressed with the quiet courage with which these people were bearing the loss of their all. Another fact borne in upon one's mind was the distressing amount of unrelieved suffering which is always present in a Korean village; for while after a time cases immediately due to flood conditions lessened, there was no cessation of the steady stream of sick who sought our ministrations.

It was a worth-while thing to have made this special effort, carrying our medical services to these needy people. It would be an even better thing if some regular visitation could be organized from Severance so that villages within easy motoring distance from Seoul could have regular clinics. To do this would not, I believe be beyond the powers of our present staff—graduate and student—and would greatly increase our usefulness as an institution to the community.

A closing word: Relief work, medical and general has largely come to an end. Unhappily the destitution and hardships of the many deprived of home and livelihood have not ceased. We must be prepared to continue to help in the hard months that lie before us. Nor are the needs of these people merely physical; we did something to meet the medical needs; often in those days of crowded service for the body, one wished that something adequate were being done to minister to the spiritual needs of these stricken people.

Nurses Training in Severance

EDNA M. LAWRENCE, R. N.

THE REGISTRATION of pupil nurses at present is as follows : 3rd year 13, 2nd year 7, 1st year 9, total 29. The spring class of nine was the first to be admitted since the school has become an "appointed school,—one whose graduates may receive license as nurses and midwives without further government examination. All this class have had 2 or more years of high school, 3 are graduates and one has had college preparatory work. They are all but one baptized Christians. We could have taken in more than 9 but that would have crowded the dormitory beyond the safety point. All the students are making satisfactory progress.

There were six nurses graduated in March this year, the commencement exercises being a joint one for the Medical College and Nurses School. One of the graduates has been kept on our own staff, one has gone to Hamheung, and one to her own home. Three others are filling out their 3-year period.

As to faculty, it is of the *best*. Mrs. Ludlow teaches Dietetics, Mrs. McAnlis Sewing and Housekeeping, Miss Shields Hygiene and Care of Infants; Drs. D. B. Avison and B. Koo, teach Pediatrics and Contagious Diseases; Dr. K. S. Oh, Skin Diseases, Dr. Paul Choi, Pathology and Bacteriology, Mr. K. Y. Lee, Pharmacy and Materia Medica; Miss Fanny Cho is teacher of Massage, and Mrs. Ariguki, Japanese and Ethics. A medical student, under one of the professor's direction, has been teaching Anatomy and Mathematics. One of our own graduate nurses is teaching Nursing Ethics and Bandaging. I have been teaching Practical Nursing, and some English with the assistance of Mr. Lee our secretary.

Eleven of our graduates are on the nursing staff now, and one graduate of the East Gate Hospital Training School. Chung Do Eun has been Night Supervisor for many months and is most satisfactory. Kim Young Sil is Day

Supervisor and in charge of supplies—except ordering. The others are in charge of departments or special clinics. But as yet these Korean nurses need help and direction in their work. So that our greatest need now, as before, is for more foreign nurses. To try to run such a large institution as this with only 2 or 3 foreign nurses is an unfair thing, unfair to the nurses, to the institution, and to the pupil nurses. We have a good dormitory, a good teaching staff, a fine lot of graduate and pupil nurses, why do we have to cripple the whole work and especially the training of the pupils under our care because of the shortage of foreign nurses to give the general supervision? There are many nurses in the homelands eager for a chance to come and six mission boards are each supposed to have at least one missionary nurse on the staff.

Sometimes I find it all depressing, especially when I am very tired and have to be with the sick people all the time, at such times I run away to our garden to see the fresh growing things, the buds and leaves and the blossoms. A change is often as good as a rest, and though I do not call myself a gardener, because some one had to do it I been posing as such and have been surprised at the results—some of my seeds actually came up. When I am refreshed, I have no trouble understanding or answering the numerous questions that come to me; but when I am tired, my brain acts as though it never knew a single word of Korean. Among the hard things for me, are the number of demands on my time and the many times a day I hear my name called whether I am in the hospital or in the home. It seems that some one is always wanting the "Kan Ho Won Chang" until in desperation I'm threatening to change my name to "flunky Chang" or "Kyo Chang" or "Scrubber Chang"—anything seems better than the one I've heard so constantly the last few years.

NURSES TRAINING IN SEVERANCE

The secret of carrying on must be cooperation and organization. I know that our present staff of doctors, nurses, office-force, and orderlies are working together for the efficiency of the service and the thorough teaching of the nurses.

After this digression, I want to add a few more words about the nurses training. The nurses and the whole hospital staff—except the Superintendent of Nurses—are on an 8-hour schedule of work, and have been for some time. This has been a factor in the improved health of the nurses. Last year only 96 days were lost on account of sickness for whole school. In 1919, the student nurses lost 124 days in one month and 67 in another. Better attention to the health of the girls in many ways, has given us this cause for thanksgiving.

We have just started a new feature in our Nurses Training work. In April we had a meeting of all the nurses and students and a society was organized for mutual profit and pleasure. The program consisted of reports of especially interesting cases, given by the nurses in charge. Others discussed the work and responsibility of nurses in some of the more important positions in the Hospital. The May meeting followed along the same line. We

hope to have monthly meetings most of the school year.

Dormitory rules have been changed to allow greater freedom to the girls. Two or more pupils may go out in the daytime without the matron or other chaperone. They must fill in a slip stating where, when, and why; this slip is approved by the Nursing Superintendent or a Korean nurse, member of the Nursing Com. The plan seems to be working out all right, the girls have responded to the increased trust placed in them.

Last September, the Government General "appointed our School for Nurses and Midwives," so that regular graduates may be licensed without examination. The students must have had at least 2 years of "higher common school," or equivalent, for matriculation, they must also present satisfactory evidence of good character and good health. The aim of the school is to train Christian girls into faithful and intelligent nurses, that they may realize the beauty of the spirit of self-sacrifice and service; that they may become efficient co-workers in the hospitals, and eventually branch out into all of the many phases of public Health Work and social service.

Severance Wholesale Medical Supply Co.

T. E. REX TAYLOR, PHAR. G.

Severance Wholesal Medical Supply Company is a new organization in Korea. It is an agent which endeavors to supply the medical needs of the doctor and his hospital. About a year ago, we found that our Sales Department did not fulfil the real needs of the situation. The Severance Hospital Sales Department was considered by all wholesalers merely as a retail department or as a regular retail pharmacy which could not obtain the agencies or represent firms either in America or Europe.

Our new organization so far has been quite encouraging, due to the fact that we are Wholesale Distributors for Eli Lilly & Company; agents for Merck and Company, Chemists; Vollrath Enamel Ware; Sunbeam Chemical Company, Rit Soap Dyes; The New York and London Drug Company "Nyal Line"; S. S. White Dental Manufacturing Company; Libby McNeil, Libby Evaporated Cream; Davis & Geck, Cat-gut and Sundries; and the United States Rubber Export Company's Druggists' Sundries.

Severance Wholesale Medical Supply Company sells wholesale to Mission hospitals,

Mines hospitals, Korean doctors, hospitals and dispensaries, and pharmacists. Our Severance Pharmacy takes care of the retail end of our trade. We thus enable our own graduate Korean doctors to continue using the drugs that they have learned to use, keeping them informed of all the new advances made in the science of pharmacy and medicine. We get in contact with the hospital and doctor by making special trips introducing our products. So far, the last year we have covered Korea twice, gaining good results and encouragement for the future. We are interested that this new organization be successful and give us a good profit because it is through this medium that we hope to care for a greater number free patients in the Clinics and wards of Severance Hospital.

Severance Wholesale Medical Supply Company is well equipped to manufacture the most common medical supplies.

We have electric tablet machines, ointment machines and triturating machines which work daily turning out supplies not only for our hospital, but for the many Korean hospitals through the country.

Nursing in "Severance"

ELIZABETH R. ROBERTS

FROM MY FIRST days in Korea I heard a great deal about "Severance", and therefore when the opportunity came to go there, I was glad to go and see for myself. Now I can say like the Samaritans, "I believe not because of the saying, but I have seen and heard for myself." During the few months I have been at Severance my impressions have been most favorable. A well-organized Hospital and Nurses' Training School; a splendid co-operation between the doctors and nurses, all working in harmony together. Personally I have received a most hearty welcome from everybody, and I am very happy to be on the Staff.

The greatest need is for foreign nurses to teach and supervise the Korean nurses. The only Missions who have representatives at Severance now are the Northern Presbyterian and the Canadian Presbyterian. Miss Payne, our Methodist representative, is at present home on sick leave, and very uncertain as to her return. The Southern Methodist have never had a nurse on the Staff, and the Southern Presbyterians and the Australian Presbyterians have had none for nearly six years.

There seems to be a general idea that any nurse put into Severance Hospital will, sooner or later, either get desperately sick or have a nervous break-down. Can that be wondered at, when you consider the tremendous responsibility that falls on one or two, instead of on seven nurses, as should be the number provided to carry the work.

I urge your consideration of this problem: Is it economy to so overload a first-term missionary nurse whose responsibility in Hospital and Nurses' Training School does not let up day or night, month in and month out (except for her one month's annual vacation)? Such pressure is indeed likely to be overwhelming and to cause a break in her health or per-

manent disability. If Severance Hospital is required to change Nursing Superintendents so often as every three or five years, a continuous policy cannot be carried out, as changes are naturally made with each new nurse.

Every Mission sends patients to Severance Hospital for special care. Who will take care of your missionaries, if those few at the post have reached a stage of weariness described by some one:

"The Nurse Off Duty." "I am too tired to live, to sleep, or to laugh or to cry. I have given them all I can give; I am too tired to move my head and my hands; and my soul, too weary to love, to stimulate, soothe or console. I am tired of crutches and canes, of bandages, medicine, dope. Of Doctors and dressings and pains, or sympathy, even of hope."

Being confined to work in the main Hospital and the Isolation Department, my report must savor strongly of Hospital smells and sounds, such as Ether and Lysol, moans and groans, and the bustle of busy feet in its corridors. These afore-mentioned things, (except the moans and groans) have the strongest possible attraction for me, and though I do get saturated and wrapped up in them, surely this is a pardonable sin. However, there are some things that I am not quite so wrapped up in yet; to see one patient ready to leave and two or three standing waiting to get into that bed before it is cool,—Oh, I mean, aired out. One patient may rest his weary head thereon, but what about the other two who are just as sick as the more fortunate one, who is getting the bed? And when is there time to get the bed cleaned?

Please do not judge us too hard in the matter of house-keeping, until we get a larger Hospital more foreign and Korean nurses, and a few empty beds.

Personal Report of Esther L. Shields,

May 12th, 1925

TO-DAY IS THE 105th Anniversary of Florence Nightingale's birth, and this date has been adopted in many places as Hospital Day. Shall we not plan a programme for this date next year which shall mark a special day for Severance Union Hospital, Seoul?

Lucy Larcom wrote a prayer which we echo:

"Lead forth my soul, O Christ, one with Thine own;

Joyful to follow Thee through paths unknown.

In Thee my strength renew; give me Thy work to do;

Through me Thy truth be shown, Thy love made known."

Another year of our lives has passed beyond our keeping, truly a solemn thought. The spring of last year I spent in Pennsylvania, with my own home folks and friends, this the latter part of my furlough. The story of my refreshing, happy furlough time will require a special paper.

I arrived in Seoul September 8th, 1924. Miss Lawtence and Miss Young, the foreign members of the nursing staff at Severance, had arranged for me to occupy one of the most comfortable rooms in the Nurse's Home, and with Miss Lois Henderson, we made up the family. Three days after my arrival, I began to get acquainted with some new babies and their mothers in our Foreign Department, and gradually worked into a programme which I like to call "filling in",—trying to help where most needed at the moment. To really come to know as many of the Korean patients as possible and to try to make them understand that spiritual health is as greatly—and even more to be desired—than physical health, we set this before us as one of our goals. It is a great privilege to be here where we can co-operate with Korean workers and friends; to learn to really know some of these

lovely, fine people, from whom we can learn much more than we can give, but with whom we may also share the good gifts that have been our portion because of God's love to us all.

My contact with the student nurses and the graduates in Severance has been principally; Chapel Exercises on Monday morning every three weeks; Class in Hygiene once a week; and for one term, Pediatrics.

The Annual Meeting of the Korean Nurses' Association was held in Seoul in March, and was an interesting and profitable meeting, attended by both Korean and Foreign graduate nurses.

I spend a good many hours in the Dispensary, which is very interesting. To be constantly in the general waiting room would be very depressing; but we realize that many of the sick and poor and discouraged who come and crowd the halls do find relief or recovery, though only too many have to be turned away because there is not enough room, or they are chronic cases, and incurable. Evangelistic work is carried on in the Dispensary all the time, and we hope to give sympathy and comfort, and to tell of the Great Physician, even though we cannot help them physically. An enlarged Dispensary is one of our most urgent needs. Any one who reads the story of "Mr. Doctor Man" will realize again how necessary it is to provide safety for the poorest children if we expect to have reasonably safe and sanitary arrangements for the children who are usually in the most favorable circumstances.

With gratitude to God for all His goodness to me, the kindness of friends, the opportunity for service in the future,—I look forward with hope and gladness, and pray that every step shall be guided and strengthened by the God of all grace.

CURRENT BUDGET SUMMARY

Including Missionaries' Salaries but excluding Cross Entries

INCOME

EXPENDITURE

Board Appropriations	115,295.23
Special Donation	23,000.00
Donated Supplies	10,766.49
Field Donations	612.13
Administration (Gain on Exch. & Disc.)	7,892.42
Electricity & Water, &c.	1,743.65
O. P. D., Korean	43,947.67
O. P. D., Foreign	5,524.80
Hospital, Korean	38,954.65
Hospital, Foreign	6,331.28
Dental Department	17,669.45
Medical College	12,826.81
Nurses' Training School	160.00
Optical Shop	11,649.39
Wholesale & Manufacturing	37,533.27
Retail Store	18,004.78
Increase in Stocks during year	24,723.89
From Surplus	6,132.57
	<u>382,768.48</u>

Religious & Social	2,021.53
Administration	20,172.45
Property & Maintenance	7,733.10
O. P. D.	82,007.54
Hospital	78,505.44
Dental Department	22,034.78
Medical College	51,079.00
Nurses' Training School	13,336.05
Optical Shop	10,967.68
Wholesale & Manufacturing	66,500.48
Retail Store	21,098.77
Equipment	7,311.61

382,768.48

Statistics of Clinical Work

O. P. D.

Number of clinics	9
Number of individuals treated	20,392
Number of free treatments	29,638—43%
Number of pay treatments	37,667
Total treatments	67,305
(Including out-calls)	

Total Expenses O. P. D.	¥ 88,179.45
Total Receipts O. P. D.	49,472.47
Average cost per treatment	1.31

HOSPITAL

Total capacity—beds	92
Average number inpatients	76.4
Number free patients admitted	649
Number pay patients admitted	1,502
Total	2,151
Free patient—days	13,670—49%
Pay patient—days	14,228
Total	27,898
Discharged as cured	713
Discharged as improved	1,096
Discharged as not improved	164
Deaths in hospital	160

Births in hospital	44
Operations under general anesthesia	633
Operations under local anesthesia	152
Total operations in hospital	835
Total Expenses of Hospital	¥ 93,127.75
Total Receipts of Hospital	45,235.93
Average cost per patient—day	3.30
Charity O. P. D. @ ¥ 1.00 per treatment	
(less than average cost)	¥ 29,638
Charity Hospital @ ¥ 2.50 per patient	
day (less than average cost)	34,175
Total Charity Work	¥ 64,813

The Korea Sunday School Convention

J. G. HOLDCROFT, D. D.

WIDESPREAD announcement has been made of the Second All-Korea Sunday School Convention which is to meet in Seoul, October 21st to 28th, 1925, and yet through the *Korea Mission Field* the Sunday School Association would like to make further announcement.

The Convention will begin with an evening session at 7:30 at the Sung Dong Presbyterian Church. Following that and continuing through the 28th there will be morning, afternoon and evening sessions. In the morning and afternoon it will be necessary to meet at both the Pierson Bible Institute and at the Sung Dong Church. Evening sessions will be held at the Sung Dong Church unless otherwise announced.

In the mornings the convention will meet in nine sections as follows: 1. Cradle-Roll and Home Department; 2. Beginners Department; 3. Primary Department; 4. Junior Department; 5. Intermediate Department; 6. Senior Department; 7. Young People's Department; 8. Adult Department; 9. Special Class for Pastors and Helpers. The first five sections will meet at Sung Dong and the others at Pierson. Chapel will also be held each morning at both centers.

The afternoon sessions will be devoted to Bible Study and to Conference, meeting in two sections in the Pierson Bible Institute and in the Sung Dong Church.

The evening programs will be varied and full of interest. Rev. H. Namkung will give an account one evening of his trip to Glasgow, Scotland, to attend the World's Sunday School Convention. The Secretaries of the World's Sunday School Association for Japan and China, Mr. Horace E. Coleman and Rev. Elwood G. Tewksbury, will speak and Mr. Coleman, will give a stereopticon lecture.

Rev. Henry Sweets, D. D., of the Southern Presbyterian Committee on Education, will also speak. It is hoped that Mr. J. H. Morris will be able to show the picture "The Ten Commandments" on the night of the 23rd. A Sunday School Pageant will be given and also a musical recital. The final evening will be devoted to a Consecration Conference.

Not least in interest, it is hoped, will be the Religious Education Exhibit which will be held in the Chapel of the Korean Y. M. C. A. This is being prepared under the capable supervision of Mrs. Crane, Mrs. Reynolds and Mr. Edwin L. Campbell. A splendid selection of Sunday School Requisites and Books suited to the needs of children and teachers, prepared by the C. L. S., will also be on view and on sale.

The Railway Bureau has granted a fifty per cent reduction for round trip tickets for both first and second class. These tickets will be sold on presentation of a blank properly filled out, and these blanks may be obtained from the Sunday School Association. Tickets will be on sale from the 18th to the 22nd of October and will be good for the return trip until the 31st.

A registration fee of one yen will be charged each delegate. Registration will be cared for at the Sunday School offices (13 Shoro 2 chome), at the Pierson Bible Institute and at the Sung Dong Church. Entertainment for all missionary delegates may be had by early application to Mr. Edwin L. Campbell. Please address him as follows: Rev. W. J. Anderson, Seoul, Chosen, for Mr. E. L. Campbell.

It is believed that this convention will be an inspiration to all who attend it. Come and help make it such, by your presence and your help.

A History of the Korean People

J. S. GALE, D. D.

Chapter XVI

THE YEAR 900 A. D., which marked in Europe the rise and progress of the Saxon people, saw in Korea a period of great disturbance. Three marked men came to the fore: one very bad, one very good and one a nondescript, contemptible creature. Let me deal with the bad man first. His name was Koongye (弓裔) Son of the Bow. The bow has had much to do with the imagination of the East. Underlying it comes the Buddha with his two arrows. A spirit, a ghost, has, as well, a string of bows hung by the girdle in its ideograph (驍).

Koongye, only one degree better born than Jephtha, was the son of a concubine, his father being King Human who reigned from 857—861 A. D. A rainbow, it seems, announced his birth. Two rows of strong teeth were born with him in his glittering jaws. The state astrologer said, "This boy brings signs of evil fortune, put him out of the way." Like

The Terrible
Koongye

Paris of Troy, like Oedipus of Thebes, he was flung aside, but rescued by his nurse, who, in her hot haste to save him, poked out one of his eyes. He grew up, therefore, a priest with but one eye and with no mind for religion, his thoughts being entirely on earthly things. A passing crow once let fall an ivory book-mark that struck him on the head. It had carved on its face the character 'king.' "My lot is kingship" said he, and the times favoured his wish for they were sadly out of joint and the end of Silla's days had come.

Son of the Bow, he gathered about him like minds with himself, every man with his quiver full of hates and resentments. These he set to work

Wangkun

to thrash North Korea into line with his wishes, his headquarters being at Chulwon on the way to Wonsan. Here it was that he first met a young man named Wangkun

(王建) whom he induced to join his force. Wangkun is the second of the famous three. Already Koongye, under the strokes of his hammer, had moulded together a large part of Korea and had set going a system of terror in order to win it all. He called his state Taibong (泰封), his own title being Mireuk Pool (彌勒沸), *the Messiah of the Buddhas*. He wore a golden crown and a purple robe and as he went forth from place to place he rode a large white horse whose mane and tail were shot through with coloured tinsel. Boys and girls carried umbrellas, banners and flags before him. Two hundred priests brought up the rear singing psalms. He wrote many books "all proud, senseless stuff" remarks the later historian. Sometimes he would sit and preach by the hour, showing an immense amount of windy conceit. One of the priests, of a bolder turn of mind than the others, said, "From a religious point of view, sir, your talk is all meaningless bosh." Koongye turned on him like a tiger and with a club knocked out his brains. Wangkun stood by and took note.

Koongye then inaugurated a reign of terror. Every suspect was at once taken and handed

over to a violent death. The Koongye's Rule old record reads, "A hundred and more innocent people were

killed every day" so that the region about Chulwon was paralysed with fear. Said Koongye, "I am the Buddha and can read every man's innermost thoughts. I know even the evil intentions of my wife." He had an iron baton some three feet long that he used with terrific effect. When a palace-woman offended he had this heated red-hot and driven into her body. His wife remonstrated at this and Koongye made a counter charge against her, condemning her morals. She defied him and then the red-hot bludgeon with its name-

less torture was resorted to. "The smoke came out of her mouth and nose" says the recorder. He then, after having done for his wife like Herod the Great, killed his two sons.

His range of suspicion now enlarged and took in Wangkun. He called him up and inquired, "What were you and your henchmen plotting last night?" Wangkun coolly replied, "Plotting? What should I plot pray?" Koongye roared, "Don't dare answer me thus; I have power to read your heart—your very inmost soul. I shall retire for a moment and read you through and through." So, with his hands behind his back and his eye shut tight and turned up toward heaven, he meditated. At this moment a recorder, Choi Eung, who was waiting on the king, purposely let fall his pen in front of Wangkun. As he stooped to pick it up he whispered, "There is danger in standing by your innocence." Wangkun caught the hint and replied submissively, "I am indeed a rebel and deserve death." Kongye gave a great laugh and said, "There you are a straight and honest man at last." He then gave him a gold-mounted saddle and said, "Now don't deceive me again."

As the heart of Koongye grew more and more hardened people turned with longings toward General Wangkun. In the 3rd Moon of 918 A. D. a Chinese merchant all the way from Tang came to Korea with a very wonderful mirror in his possession. Turned one way to the light it revealed in its depths the following inscription: "Behind the Three Waters and beneath the Four Nets, Heaven will give to Chin and Ma a Son, who will first catch the Chicken then the Duck." It also read, "Two Dragons there are, one in the Pines and one in the Shadow of the Black Rock." The merchant, regarding it as a very wonderful mirror, made a gift of it to King Koongye. Koongye handed it over to three of his wise men who at a private sitting worked out its mystery. "The Three Waters" said they, "are the three seas about Korea; Four (四) and Nets (維) together make up the character

for Silla (新羅); Chin and Ma are Chinhan and Mahan; Green Wood or Pine refer to Songdo where the son of the Dragon will become king." Wangkun, it seems, had scales under his arms and so was accounted a *dragon* in his descent. The Chicken was Kerim (鷄林) and the Duck (鴨) the Yaloo River (鴨綠江). All from the far north to the far south were to come under his sway. To tell it out, however, would have meant instant death at the hands of Koongye and so the wise men cleverly arranged a second reading which gave all to the Son of the Bow. This greatly pleased His Highness.

Meanwhile secret meetings were held in the quiet hours of the night. Retainers gathered round Wangkun and said, "This man means the death of us all. He has already killed his wife and children and will have the rest of us with no long delay." But Wangkun made answer, "I can't interfere. I have sworn an oath of good faith which I mean to keep, no matter what he does. Who strikes him down strikes me." "But," said his retainers, "it is now or never. You are our man; not only are all eyes on you but the mirror from China flashes its light as well. You must lead us forth or we shall all die." Yoosi, Wangkun's wife, came in at this point, but Wangkun, wishing her away asked her to go to the garden and get some melons. Yoosi pretended to go but instead she slipped into a corner of the near room and listened. Overhearing the proposition she rushed into the room and said, "Do the right. To rid the earth of this bloody handed monster is your duty. My heart leaps at the chance. Will you, a warrior, be less valiant than a woman? It is God's will; accept of it." With her own hands she had out his coat of mail and put it on him, his helmet she made fast round his chin while his generals stood wonderingly by. When day dawned a throne was improvised—a heap of rice bags and from the top of this he received their oaths of allegiance. A shout was raised "Long live the King."

Wangkun
is King

The Magic
Mirror

When Koongye heard it and saw the rush to the standard he said, "Wangkun has got it; that's the end of me." He hurriedly donned a suit of hempen cloth and fled for his life. In a cave in the Sambang Pass to which my attention has been frequently drawn, he hid and for days subsisted on roots and tufts of grain. The country people sought him as they would a wild beast. At last they found him, surrounded his cave and finally beat the life out of him with savage glee. For twenty-eight years he had been the scourge of this unhappy people.

On a woman's word, Yoosi, Daughter of the Willow, hung the fate of the Kingdom. It was her decision and her deft fingers buckling the helmet round Wangkun's halting chin that decided the fortunes of the day. Let Yoosi be held in highest honour. Wangkun was great but not greater than she.

At this same time there arose in South Korea a robber chief named Chin Whun (甄萱). His original name was Yi which he changed to Chin (甄) the Potter. When a child, it is said, his mother left him once under an oak tree while she ran with a noon-day luncheon to his father working in the fields. On coming back what was her surprise and fear to find a tiger suckling her little son, as Romulus was mothered by the wolf fifteen hundred years before.

The man Chin grew and prospered, nearing seven feet in height. He gathered five or six thousand followers like-minded with himself and set up a kingdom with Chungjoo as capital calling his state "Later Paikje." In a campaign of plunder he marched on Kyungjoo, stormed and took the Golden City, murdered the King, violated the queen and left Silla in ruins. A wild Mohamet of East Asia he was, with many wives and many sons. But of all his varied brood the fourth child was the offspring of his choice, Diamond, Keumkang (金剛). Him he made Crown Prince, which greatly angered his firstborn,

Sinkum. Full of fierce resentment this son made war against his father and, carrying all before him, took both him and Diamond prisoners. Diamond he killed, while his father he locked up in Keunsan Temple. From this place, however, he made his escape and went with a pitiful story to Wangkun at Songdo. King Wang, kindly of soul, listened. His feelings arose against the unnatural son and he marched south with five thousand men. A great battle was fought off Kongjoo where Sinkum was defeated. He surrendered and Wangkun forgave him. Chin Whun on the other hand had no mind for this and called for vengeance but Wangkun would have no more killing. Furious at the thought of the rascal getting off Chin Whun worked himself up into madness and died of an abscess the brain or, as we would say, of a broken heart.

Wangkun in conference with his scholar attendants decided on a name for his country; a name that has had a remarkable history. They called it *Koryu* (高麗) *High Hills and Sparking Waters*. *Silla* means *New Silk* and *Chosen* reads *Morning Freshness*. Both these names had passed away and now *Koryu* (Korea) it was called. China learned the new name so well that even today she says Cow-oo-li (Koryu) not Chosen. Westerners as mentioned in Chapter I, learned the name of the country from her and so now, though this name has been discarded by the Korean people for five hundred years, we still use it and call her Korea.

The old marks of the pillars still stand and the high foundation stones that show Songdo as a great and prosperous city. But it had many fears to encounter and many battles to fight.

The barbarian of the north has always been a nightmare to Korea and especially one terrible variety that appeared at this time known as the Kitan Tartar. His original home lay east of the Kinghan Mountains and north of

the Sungari River, where he had been subject to the Turk, to Chinaman, and to the Khatan tribes each in his turn. But in the year of grace, nine hundred, these tartars suddenly overflowed their borders and like the grasshopper that multiplies by the million in one season and fades away in the next, so they swarmed forth. They swept down on the Yaloo, over-ran North China and finally took possession of everything to the banks of the Yellow River, making Peking their capital. They had nine kings in all, who ruled during their time of occupation, and the terror of their name was felt through the whole Far East. Their eyes were on Korea too and when Wang set up his capital at Songdo they sent gifts of camels, their real intention being a sudden and swift invasion. Wang-kun however maintained his quiet and self-possession and made an admirable host.

Among his kind acts was a visit paid to the last possessor of the house of Silla. He remained with him twenty days and they had a right royal time. Thus was it that Wangkun won over the whole peninsula without force of arms or recourse to the assassin's knife.

As in 1777 A. D. a Scotch widow of Ayr saw her son, Jock Hempy, lying dead on the battlefield three thousand miles across the sea and caught visions of his wraith again and again, so certain people in Korea nine hundred years before had seen in advance the fall of Silla. Among these was an odd creature named Chuyong(處容) whose appearance was marked as strange and his dress peculiar. He came and sang and danced before the King and so fascinated His Majesty that he made him a *keupkan* or state minstrel. On moonlight nights his custom was to go out and dance in the market place where he would utter strange cryptic sounds like the oracle at Delphi. Even today after a thousand years Koreans talk of Chuyong and dance his dances. One night in the wake of his weird goings-on came four men—"dress peculiar and faces terrible." They danced be-

fore the king and in raucous tones sang *Chiri tato topa topa* (智異多逃都破都破) which translated ran, "Chiri (Silla) broken, all will fly, fallen her city, fallen her city." Chuyong by his mysterious doings became the father of maskers, the lowest of Korea's social scale. From now on, on special occasions they would appear with horrible faces: lions, dragons, devils, to the amusement of the children and the disgust of the ancient Confucian scholar. Maskers and actors became in Korea the pariahs of the world, lower than the scavenger. From sacrificial ceremonies they were ordered to keep away, as the spirits of the dead would never deign to descend on seeing them near.

In the dignified round of Confucius where even every step is taken according to a fixed and inflexible law, the wild jumping of a set of clowns was the limit of indecency, at which the scholar would not even look. Hence accordingly the masker went down to the eternal shades taking with him the theatre, the stage and all their accompaniments.

At this particular period in view of kingdoms rising and falling, Korea resorted to a very strange expedient to hold the state steady. Here and there throughout the land she erected geomantic masts there were supposed to be safety pillars to which the ship of state could anchor. The custom began about 900 A. D. and continued till eleven hundred or so. Two huge pillars of stone were erected first as holders; the mast clad in bronze, was placed between the holders bolted firm and bound about. Sixty or seventy feet high it might reach up and speak its prayer for good luck to all the world.

To the north of Pyengyang city a mile or so, such a pair of ancient holders, fifteen feet high I should think, still stand. What an immense mast must have been required to fit closely between them—gone now under the "whips and scorns" of a thousand years. Another pair at Chiksan, the mining centre, speak still their long forgotten message. In

Kyungjoo is one yet standing with an inscription upon it that may interest the reader. It was erected in 1182 A. D. when William the Conqueror was on the throne of England. The writer, a Hallim Doctor, Kim Wun, says, "I have heard that such a mast as this, set up before the gates of the Buddha, serves as a spiritual guard to the palace of the master. It suggests the blue heron flying up to heaven, or the dragon winging his way toward the illimitable expanse. Those who set it up did so as an act of faith and from a pure heart. An iron staff it is for the suppression of the devil; a divine arrow from the sky to chastise all rebels. Sixty feet upward it rises to touch the clouds and prop up the sun. It pierces the fogs and rides clear beyond the mists. Master No of China failed to make a ladder to the sky, or an umbrella for the gods, but we have done better—a rope of silk have we made to make fast the ship of state, a pillar indeed to which to tie for safety. The mind that reared it is a mind deeply imbued with religion. A glad assurance rests on its being set up. By means of this mast all fears are dispelled and a place of safety is made sure."

These masts, while associated with the Buddha, have in them as well a Taoist element where *fungshui* plays a part. As to whether they come from China or are purely of Korean origin I am unable to say.

About this same period pagodas began to be erected, some of stone, some of brick, of every variety of form. How solidly they were built to have outlived the thousand years. They differ in thought from the mast as they

the Age of
Pagodas

are supposed to cover the relics of some faithful priest and are intended as an inspiration to generations to come. Many carved images too of the Merciful Buddha, *Mireuk*, came into being at this time, the greatest of these being at Eunjin (恩津). What a busy world it was, especially from the religious point of view. We are informed that the number of houses in Kyungjoo was 180,000. Five to a house would mean nearly a million of a population. A note reads, "The great houses of Kyungjoo were called *Keumiptaik*—Wealth Abounding. There were thirty-five of such. Houses and halls of amusement too were built for the four seasons, beautifully decorated, with the accents of sweet music always about them." But the end had come with the handwriting on the wall. Silla, silken coated, soft fingered, highly bejewelled, goes down, while Songdo, rough-ridden, hard-handed, kindly-souled comes into being.

Much colder in winter was Songdo than Kyungjoo. How did they heat the houses then? As now, by the *kang* floor. Here is what was written about 1200 A.D. about these fires :

The Kang
Fire

Beneath the winter's moon the biting cold
Sharp-toothed sets fingers on my quivering skin.
At last, good luck, a fire blows 'neath the floor
With heat awakening from its fagot neath brand.
The welcome warmth is like the breath of spring,
And friendly grows the blanket at its spell.
I speak my satisfaction so that all may hear ;
Once more in hand I feel myself and live.
Not that I greatly care for comfort's cheer,
But how to meet the cold's the question.
The really great feel neither cold nor heat,
But I am no such breed, blue shivering I.



A Vision.

Grant me, O Lord,
 A Vision of the Crucified
 As once he died,
 With cruel marks of nail and spear
 On hands and feet and side !
 No crucifix, or bloodless cross, O Lord,
 But just this Vision in my soul afford,
 That all my heart outpour
 Afresh its adoration
 To the God of my salvation,
 That seeing once again I once again adore.

And as I thus afresh
 Survey the wondrous cross
 On which my Saviour died,
 My richest gain were loss,
 And all my pride contemptible ;
 As hands and feet before my gaze outpour
 In precious drop by drop
 Their life-blood store, to cleanse my sin
 And make me clean within.
 Sorrow and love will overflow my soul
 And all my being bend to His control :
 Grant this, O God, to me—
 Child of eternity—
 A vision new of Wondrous Calvary !

Then, in the night's most silent hour,
 The word came clear
 To listening ear—
 I saw the Lord, high, high,
 And lifted up ;
 Not on a cross, but crowned
 In glory bright ;
 And His train filled the Heaven of heavens
 With light.

I looked, and that bright train
 Swept on before me—
 Bright, shining, radiant :
 In an endless throng,
 Full of a rapturous song,
 Following, following,
 Their glory-crowned King.

Not on the Cross ! For now for us to-day
 The King of Glory passes on His way :
 The Great Procession has begun
 From sun to star, from star to sun.
 Not on the Cross to-day ! The one supreme
 event
 To which the whole creation moves
 Is this His Crowning Day :
 The Heavenly Bridegroom passes on His way

Jean Newberry
 (Formerly Miss Perry of Korea)

Notes and Personals

New Arrivals

Southern Presbyterian Mission
 Dr. and Mrs. Lloyd Boggs, arrived Sept. 14th,
 appointed to Chunju.
M. E. Mission, W.F.M.S.
 Miss Myrta Stover and Miss Moneta Troxel
 arrived Sept. 3rd. Now in Seoul.

Northern Presbyterian Mission
 Miss E. Jaquette ; Teacher of Missionaries'
 children, Pyengyang.
 Miss Jeanne Sloan ; Teacher of Missionaries'
 children, Pyengyang.
 Rev. and Mrs. O. V. Chamness, arrived in
 Sept. Taiku.

Australian Pres. Mission
 Miss Clara Ellis, arrived in August. Appointed
 to Tongyeng.

Canadian Mission
 Miss F. Milligan arrived Sept. 10th. Teacher
 of missionaries' children, Hamheung.
Y.M.C.A.
 Mr. and Mrs. Gordon Wilber Avison, arrived
 Sept. 18th, Seoul.

Returned from Furlough

Southern Presbyterian Mission
 Mr. and Mrs. M. L. Swinehart, August 31st. to
 Kwangju.
 Miss Anna McQueen, August 31st, to Kwangju.
 Rev. Robert Knox, D. D., wife and daughter,
 August, 31st to Kwangju.
 Miss Lavalette Dupuy, August 31st, to Kunsan.
 Miss Susanne Colton, August 12th, to Chunju.
 Miss Ethel Kestler, Sept. 12th, to Chunju.
 Rev. and Mrs. L. O. McCutchen, Sept. 12th, to
 Chunju.

Left on Furlough

Southern Presbyterian Mission
 Mr. Charles Wilson, to U.S.A. July 9th, from
 Kwangju.
 Rev. J. V. N. Talmage and sons, to U.S.A. Sept.
 1st, from Kwangju.
 Miss Miriam de Hass, to U.S.A. July 21st, from
 Kwangju.

Births

Southern Presbyterian Mission
 To Dr. and Mrs. J. K. Levie, on July 17th, a
 daughter, Jessie Ruth.
 To Rev. and Mrs. John MacEachern, on July
 10th, a son, Donald.

Southern Methodist Mission
 To Rev. and Mrs. L. P. Anderson, on Aug. 25th,
 a son, Leonard Porter.

Southern Presbyterian Mission
 To Dr. and Mrs. Douglas Avison, on Sept.
 10th, a daughter, Joyce Rawson.

Death

Southern Presbyterian Mission
 Rev. Eugene Bell, D.D. at Kwangju, on Sept.
 28th, after 29 years' service on the field.

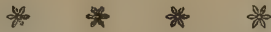
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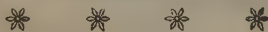
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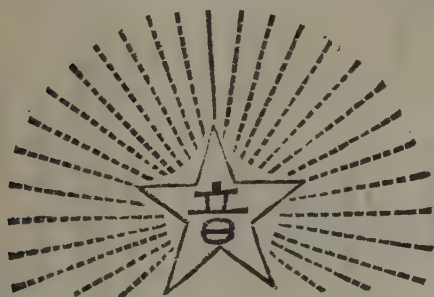
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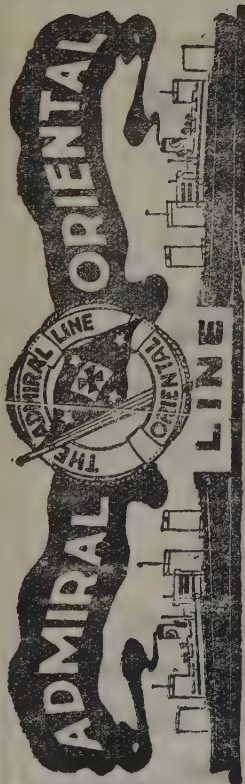
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BLANKETS
DRESS GOODS

TRAVELLING RUGS, DOWN QUILTS,
SUITINGS, OVERCOATINGS, UNDERWEAR, HOSIERY,
COOKING UTENSILS, OIL STOVES, NOTIONS,
FANCY GOODS, PERFUMERY, SOAPS,
UMBRELLAS AND WALKING
STICKS, ATHLETIC GOODS



WOOL YARNS

(ENGLISH)

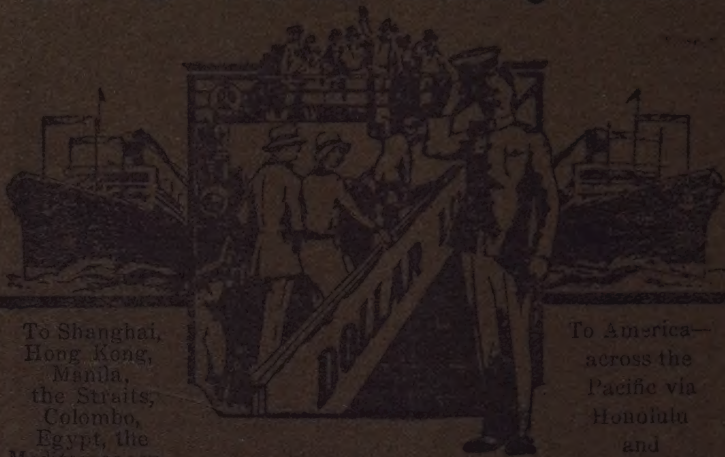
Leather Goods, Needle Cases, Mirrors, Padlocks, Tickings,
Sheetings, Linens, Wool Flannel, Etc.

GOLF GOODS

Only foreign made goods are stocked,
IMPORTED DIRECT FOR MANFORD'S

WRITE TO US

TWO-WAY SERVICE



To Shanghai,
Hong Kong,
Manila,
the Straits,
Colombo,
Egypt, the
Mediterranean,
and New York.

To America—
across the
Pacific via
Honolulu
and
San Francisco.

WHETHER you're traveling east or west, DOLLAR President Liners will carry you. Eastbound they afford two sailings each month. Westbound they offer four sailings each month, as far as Manila—thence to Singapore and beyond, round-the-world, on fortnightly schedule.

With most frequent and convenient service, these great oil-burning liners are notable for their speed and steadiness. All staterooms are outside rooms, with real beds (not berths) and luxurious furnishings. DOLLAR Line cuisine is world-famous.

STOPOVERS ALLOWED AT ANY PORT OF CALL

Eastbound: Kobe, Yokohama, Honolulu, San Francisco,
Westbound: Shanghai, Hong Kong, Manila, Singapore, Penang,
Colombo, Suez, Port Said, Alexandria, Naples, Genoa,
Marseilles, New York—and nine other ports round-the-world

NEXT SAILINGS FROM KOBE

EASTBOUND
To San Francisco
PRESIDENT PIERCE,
October 4th
PRESIDENT TAFT,
October 18th
PRESIDENT WILSON,
November 1st

WESTBOUND
Round-the-World
PRESIDENT ADAMS,
October 3rd
PRESIDENT GARFIELD,
October 17th
PRESIDENT MUNROE,
November 13th

FOR PASSENGER OR FREIGHT RATES, APPLY TO

DOLLAR STEAMSHIP LINE

AGENTS AT SEOUL

TRANS-PACIFIC SERVICE	ROUND-THE-WORLD SERVICE
W. W. TAYLOR & Co.	J. H. MORRIS
AGENTS AT CEMULPO	
TOWNSEND & Co.	BENNETT & Co.
AGENTS AT CHINNAMPO	
BENNETT & Co.	

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